

# Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance  
Board Members

May 2020

# DASHBOARD REPORT: BASED ON INCURRED CLAIMS THROUGH DECEMBER 2019

Includes Projections for Incurred, but Not Yet Reported (IBNR)

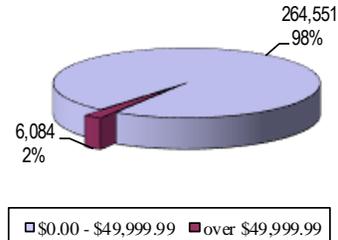
## Enrollment

Fact	Jan 2018 - Dec 2018	Jan 2019 - Dec 2019	% Change
Employees Avg Med	144,605	143,258	-0.93%
Members Avg Med	263,285	263,774	0.19%
Family Size Avg	1.8	1.8	1.13%
Member Age Avg	36.8	36.7	-0.32%

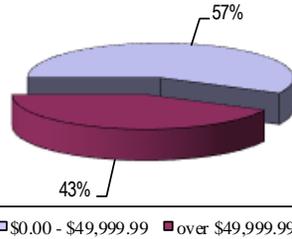
## High Cost Claimants

Jan 19—Dec 19

### % of High Cost Patients



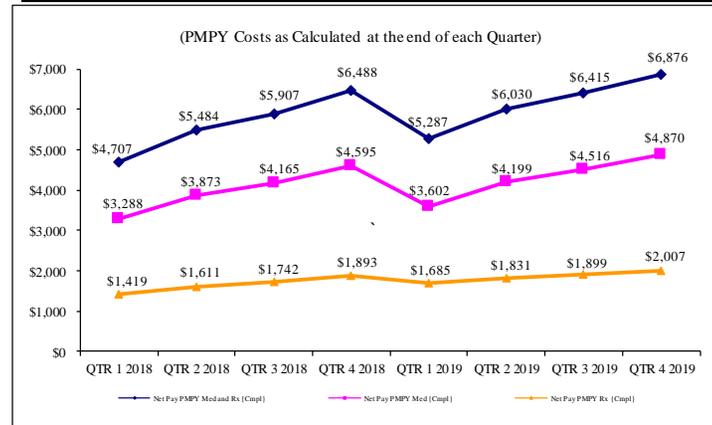
### % of Total Net Payments (Med and Rx)



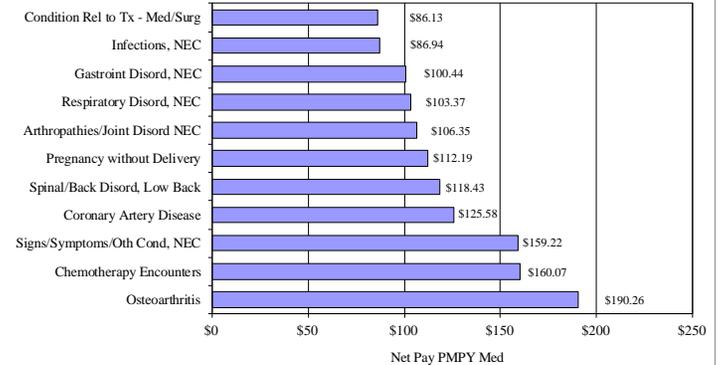
## Prescription Drug Programs

	Fact	Jan 2018 - Dec 2018	Jan 2019 - Dec 2019	% Change
Mail Order	Discount Off AWP % Rx	55.86%	55.13%	-1.30%
	Scripts Generic Efficiency Rx	97.38%	98.27%	0.92%
Retail	Discount Off AWP % Rx	49.13%	46.70%	-4.95%
	Scripts Generic Efficiency Rx	96.73%	98.55%	1.87%
Total	Discount Off AWP % Rx	51.49%	49.97%	-2.94%
	Scripts Generic Efficiency Rx	96.84%	98.49%	1.70%
	Scripts Maint Rx % Mail Order	20.78%	26.12%	25.67%

## Net Incurred Claims Cost per Member



## Top 10 Clinical Conditions



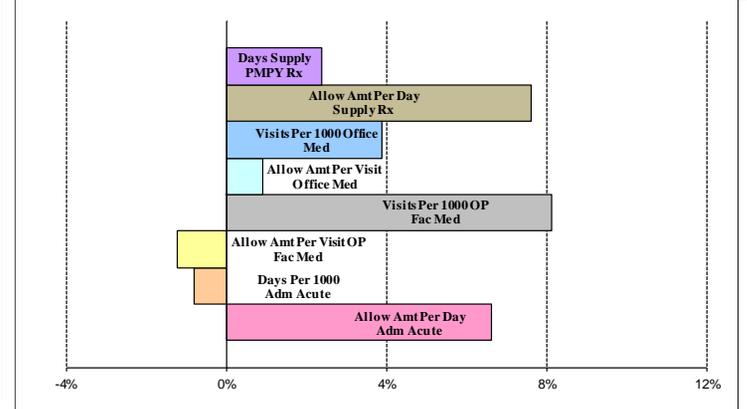
## Allowed Claims Costs PMPY with Norms

	Jan 2018 - Dec 2018	Jan 2019 - Dec 2019	% Change	Recent US Norm	Comp to Norm
Allow Amt PMPY Med {Cmpl}	\$4,825.24	\$5,151.51	7%	\$5,245.50	-1.82%
Allow Amt PMPY IP Acute {Cmpl}	\$1,334.20	\$1,420.06	6%	N/A	N/A
Allow Amt PMPY OP Med {Cmpl}	\$3,478.28	\$3,717.59	7%	\$3,743.18	-0.69%
Allow Amt PMPY OP Fac Med {Cmpl}	\$1,934.18	\$2,081.55	8%	N/A	N/A
Allow Amt PMPY Office Med {Cmpl}	\$1,004.88	\$1,060.65	6%	N/A	N/A
Allow Amt PMPY OP Lab {Cmpl}	\$222.95	\$239.74	8%	N/A	N/A
Allow Amt PMPY OP Rad {Cmpl}	\$478.18	\$501.94	5%	N/A	N/A
Out of Pocket PMPY Med {Cmpl}	\$810.15	\$827.15	2%	\$804.01	2.80%
Allow Amt PMPY Rx {Cmpl}	\$1,883.14	\$2,074.75	10%	\$1,476.12	28.85%
Out of Pocket PMPY Rx {Cmpl}	\$211.60	\$213.23	1%	\$0.00	N/A

## Cost Drivers Support

Fact	Jan 2018 - Dec 2018	Jan 2019 - Dec 2019	% Change
Allow Amt Per Day Adm Acute	\$4,831.86	\$5,151.38	6.61%
Days Per 1000 Adm Acute	273.76	271.58	-0.80%
Allow Amt Per Visit OP Fac Med	\$1,526.74	\$1,507.80	-1.24%
Visits Per 1000 OP Fac Med	1,266.83	1,369.84	8.13%
Allow Amt Per Visit Office Med	\$123.52	\$124.62	0.90%
Visits Per 1000 Office Med	8,134.59	8,449.67	3.87%
Allow Amt Per Day Supply Rx	\$3.20	\$3.44	7.60%
Days Supply PMPY Rx	588.86	602.83	2.37%

## Cost Drivers—Utilization and Price Trends



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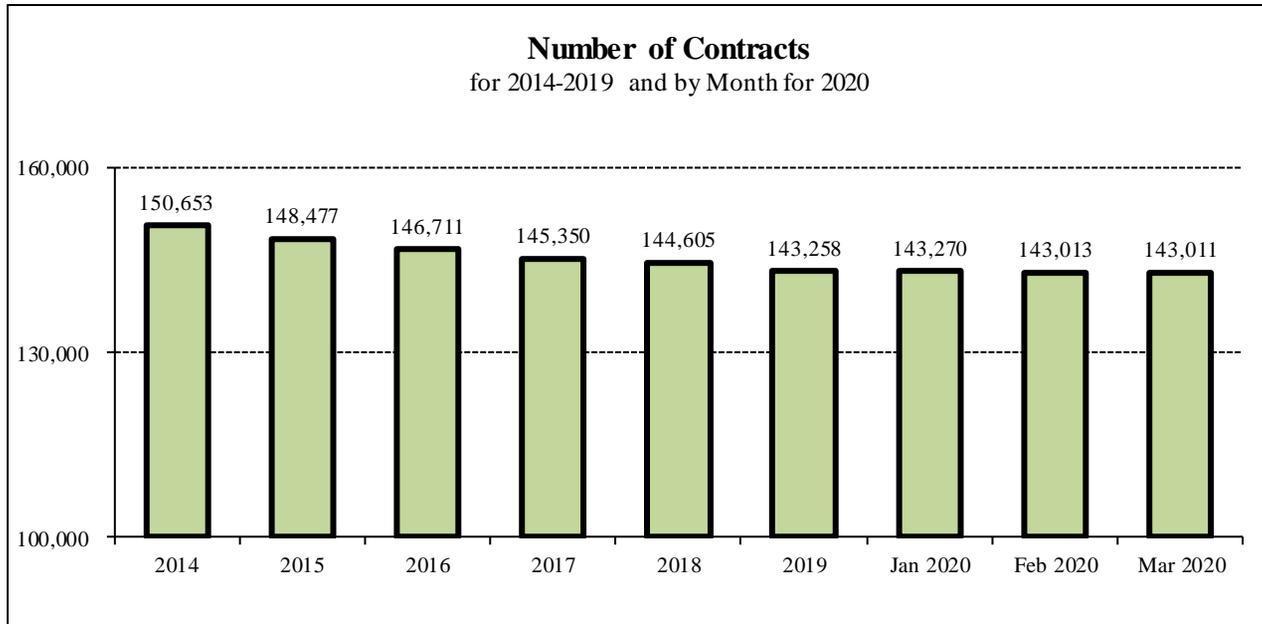
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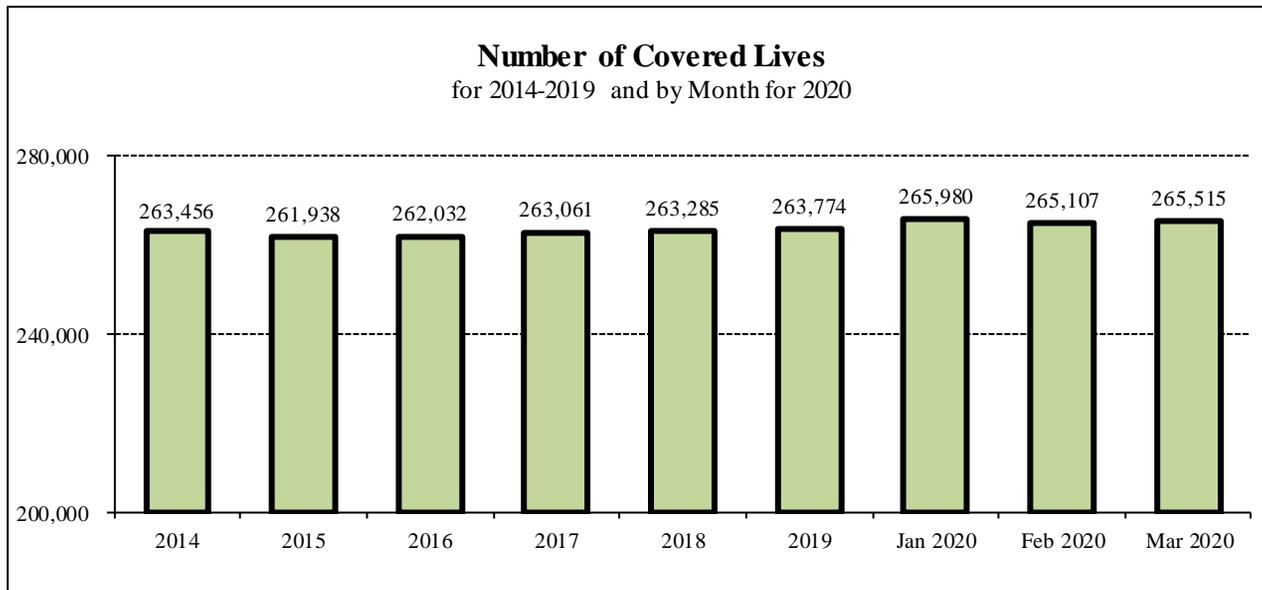
*Paid data as of: March 2020*  
*Incurred data as of: December 2019*

## Enrollment

The following chart shows planholder enrollment (contracts) for 2014-2019 and monthly year-to-date for 2020. Enrollment will fluctuate on a monthly basis. (Approximately 7,100 Cross-Reference spouses in any given month are not included.)

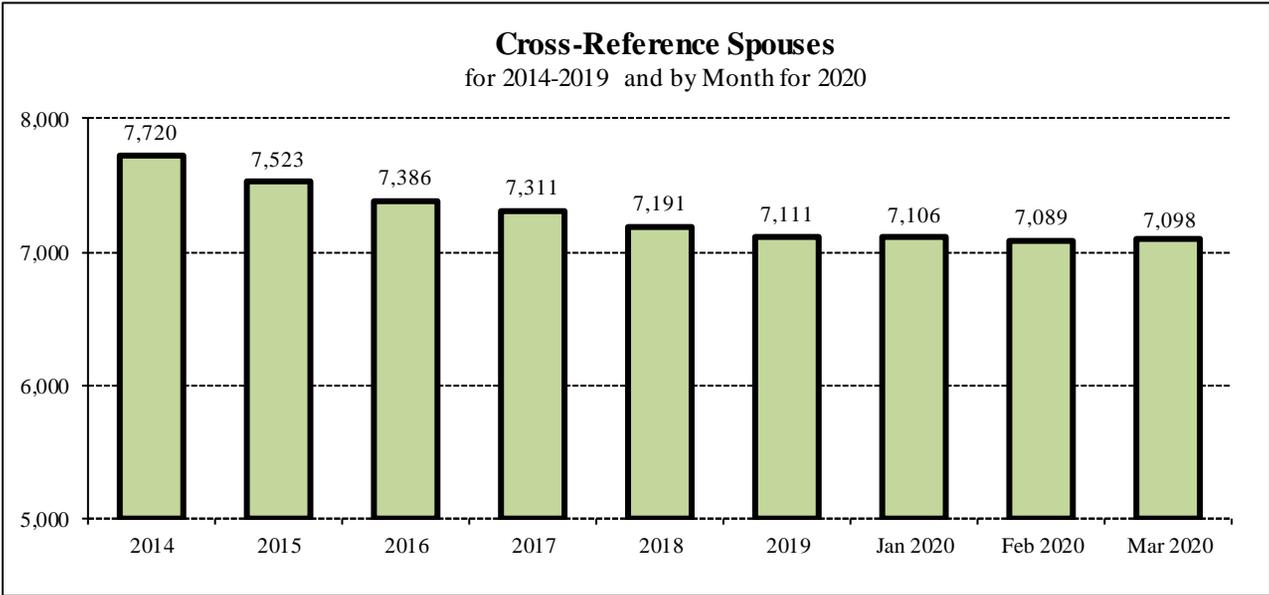


The following chart shows member enrollment (covered lives) for 2014-2019 and monthly year-to-date for 2020. Enrollment will fluctuate on a monthly basis.



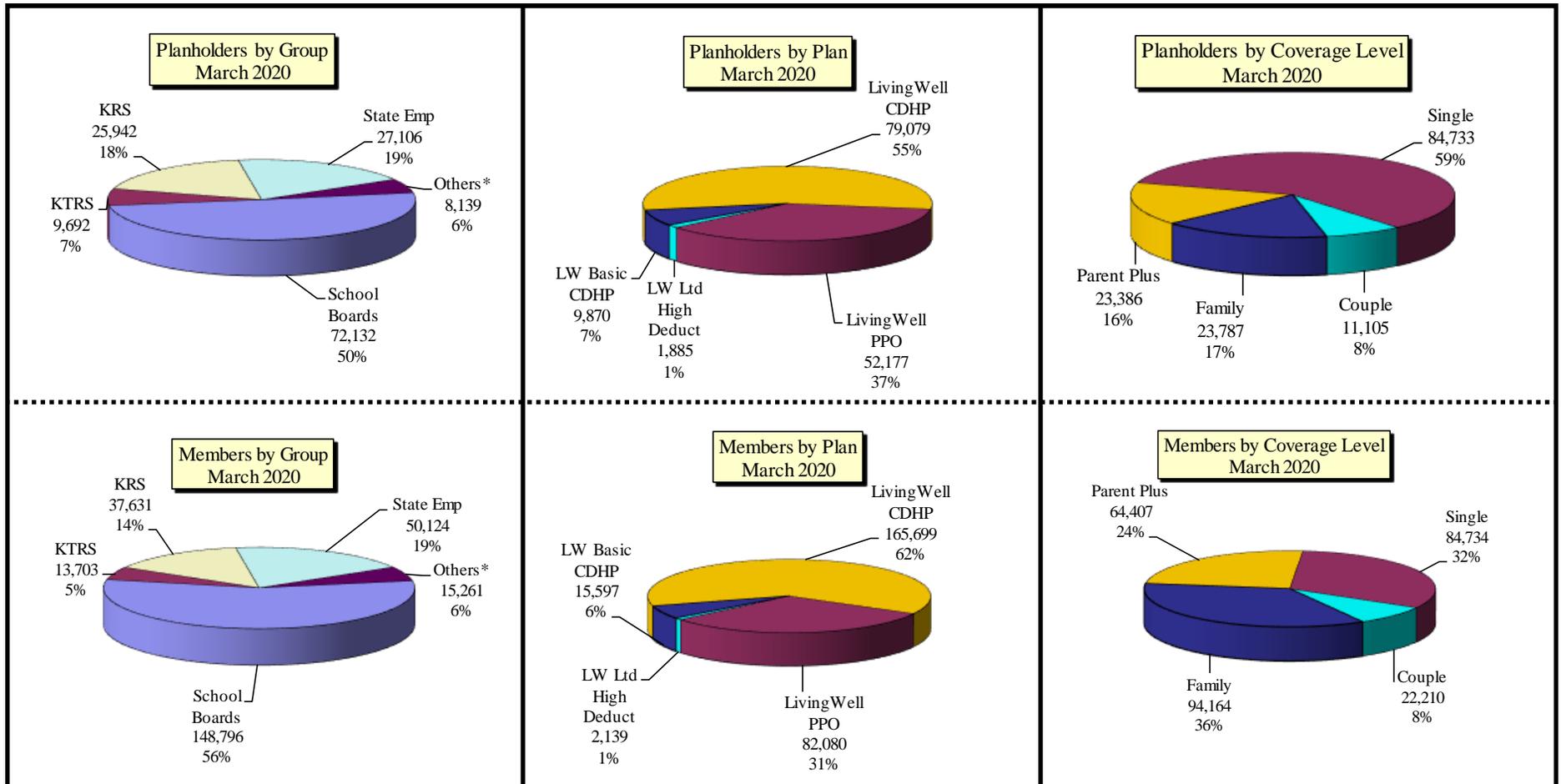
**Enrollment** *(continued)*

The following graph shows the number of Cross-Reference Spouses for 2014-2019 and monthly year-to-date for 2020. The number of Cross-Reference Spouses will fluctuate on a monthly basis.



## Enrollment (continued)

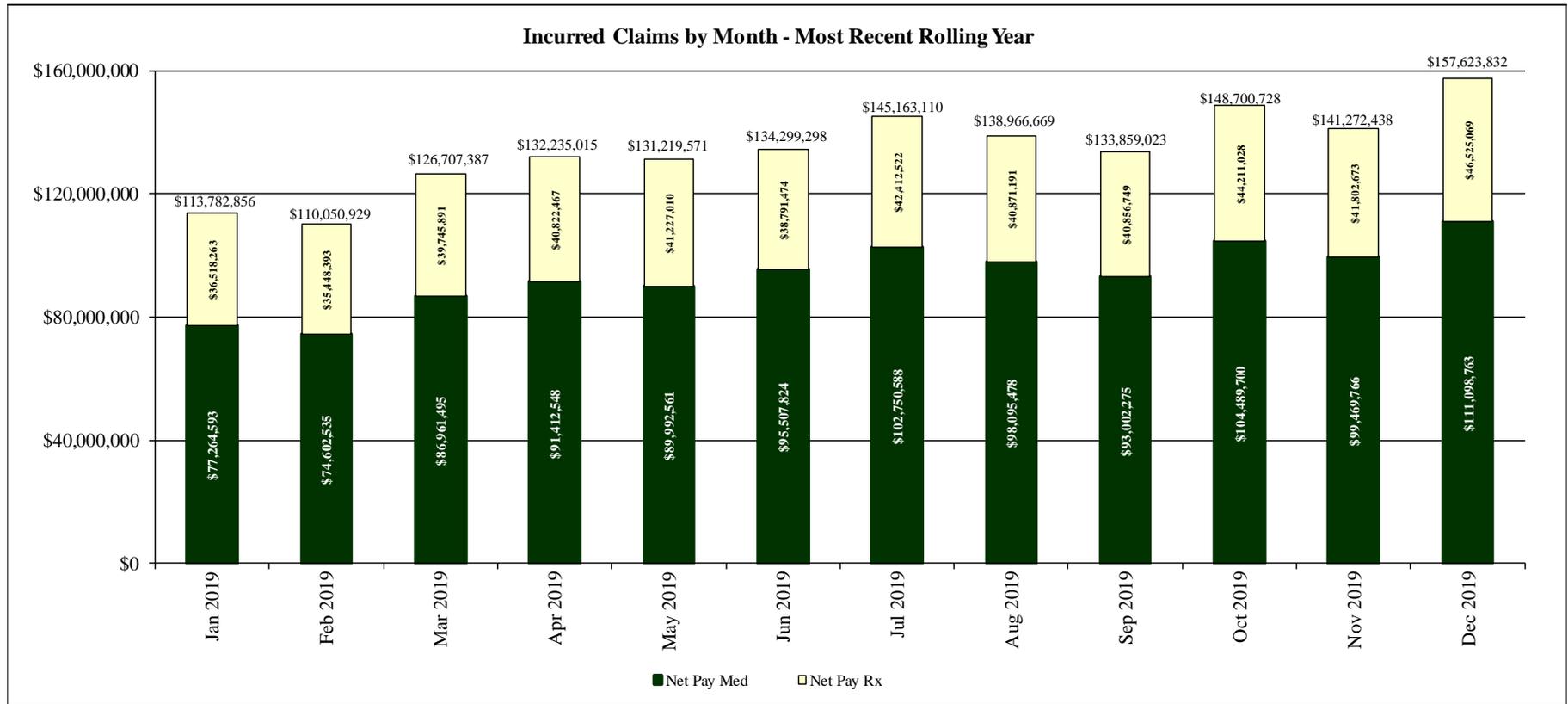
The following charts show Planholder and Member enrollment by Group, Health Plan, and Coverage Level.



\* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

## Claims Costs

Claims costs include Incurred Medical and Pharmacy (Rx) Claims Cost for the most recent rolling year.



**Claims Costs** *(continued)*

The following table represents Incurred Medical Claims by Group for 2014-2018 and monthly year-to-date for 2019.

<b>INCURRED MEDICAL CLAIMS BY GROUP</b>						
<b>Time Period</b>	<b>School Boards</b>	<b>KTRS</b>	<b>KRS</b>	<b>State Employees</b>	<b>Others*</b>	<b>Totals</b>
2014	\$465,112,511	\$121,029,097	\$216,483,334	\$202,992,249	\$80,366,825	\$1,085,984,016
2015	\$406,274,265	\$100,740,841	\$189,171,718	\$159,515,036	\$62,699,633	\$918,401,495
2016	\$435,740,756	\$101,146,437	\$194,916,035	\$172,375,342	\$59,493,914	\$963,672,484
2017	\$455,191,695	\$95,513,039	\$197,611,708	\$177,397,741	\$61,172,947	\$986,887,130
2018	\$482,910,240	\$99,728,010	\$212,593,172	\$186,585,872	\$65,008,404	\$1,046,825,697
Jan 2019	\$36,199,329	\$7,214,278	\$16,419,115	\$13,280,804	\$4,151,068	\$77,264,593
Feb 2019	\$35,568,891	\$6,381,944	\$15,123,253	\$13,012,181	\$4,516,267	\$74,602,535
Mar 2019	\$38,841,438	\$8,563,114	\$17,834,858	\$15,795,286	\$5,926,799	\$86,961,495
Apr 2019	\$43,203,028	\$7,809,362	\$17,441,165	\$17,754,156	\$5,204,837	\$91,412,548
May 2019	\$41,865,757	\$8,152,890	\$17,244,043	\$16,754,601	\$5,975,271	\$89,992,561
Jun 2019	\$48,695,499	\$7,680,654	\$17,525,630	\$15,500,037	\$6,106,005	\$95,507,824
Jul 2019	\$51,841,701	\$9,023,546	\$19,269,469	\$17,150,883	\$5,464,989	\$102,750,588
Aug 2019	\$43,640,560	\$10,050,949	\$19,873,972	\$17,729,766	\$6,800,230	\$98,095,478
Sep 2019	\$41,458,267	\$8,508,830	\$20,001,765	\$16,162,492	\$6,870,921	\$93,002,275
Oct 2019	\$49,230,846	\$9,805,991	\$20,652,357	\$18,312,716	\$6,487,789	\$104,489,700
Nov 2019	\$45,650,232	\$9,981,548	\$20,321,371	\$17,375,230	\$6,141,384	\$99,469,766
Dec 2019	\$53,670,747	\$9,832,041	\$21,261,968	\$19,352,954	\$6,981,054	\$111,098,763

\* Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

**Claims Costs** *(continued)*

The following table represents Incurred Pharmacy Claims by Group for 2014-2018 and monthly year-to-date for 2019.

<b>INCURRED RX CLAIMS BY GROUP</b>						
<b>Time Period</b>	<b>School Boards</b>	<b>KTRS</b>	<b>KRS</b>	<b>State Employees</b>	<b>Others*</b>	<b>Totals</b>
2014	\$131,098,426	\$43,053,078	\$73,830,755	\$55,751,835	\$20,884,223	\$324,618,317
2015	\$128,985,096	\$42,244,335	\$74,179,491	\$56,345,078	\$21,644,747	\$323,398,746
2016	\$150,206,049	\$44,006,471	\$82,345,637	\$62,097,368	\$23,887,655	\$362,543,182
2017	\$169,448,080	\$46,569,409	\$89,294,930	\$68,690,782	\$25,682,152	\$399,685,354
2018	\$188,840,765	\$48,500,717	\$98,906,354	\$74,042,895	\$28,072,927	\$438,363,657
Jan 2019	\$15,419,093	\$3,885,046	\$8,823,514	\$6,097,746	\$2,292,863	\$36,518,263
Feb 2019	\$14,661,968	\$3,709,625	\$8,316,586	\$6,328,047	\$2,432,167	\$35,448,393
Mar 2019	\$17,109,006	\$4,152,143	\$8,900,788	\$6,934,802	\$2,649,153	\$39,745,891
Apr 2019	\$17,405,290	\$4,129,831	\$9,402,995	\$7,239,559	\$2,644,792	\$40,822,467
May 2019	\$18,345,822	\$4,107,414	\$9,049,615	\$7,125,917	\$2,598,243	\$41,227,010
Jun 2019	\$17,306,681	\$3,855,953	\$8,646,321	\$6,441,975	\$2,540,544	\$38,791,474
Jul 2019	\$18,234,131	\$4,493,791	\$9,778,669	\$7,295,061	\$2,610,870	\$42,412,522
Aug 2019	\$18,095,860	\$4,408,085	\$8,953,761	\$6,761,171	\$2,652,314	\$40,871,191
Sep 2019	\$17,560,111	\$4,346,773	\$9,460,244	\$6,693,059	\$2,796,562	\$40,856,749
Oct 2019	\$19,518,752	\$4,404,460	\$9,911,464	\$7,613,207	\$2,763,146	\$44,211,028
Nov 2019	\$18,704,588	\$4,139,519	\$8,960,515	\$7,237,508	\$2,760,544	\$41,802,673
Dec 2019	\$20,814,814	\$4,760,286	\$9,933,777	\$7,873,388	\$3,142,803	\$46,525,069

\* Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

## Claims Costs *(continued)*

The following table represents Incurred Medical Claims by Health Plan for 2014-2018 and monthly year-to-date for 2019.

INCURRED MEDICAL CLAIMS BY PLAN								
Time Period	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	LivingWell Basic CDHP	LW Limited High Deductible	Missing*	Total
2014	\$57,385,008	\$46,095,825	\$598,724,084	\$375,470,631	\$0	\$0	\$8,215,648	\$1,085,986,030
2015	\$44,667,793	\$42,933,513	\$448,976,661	\$376,288,350	\$0	\$0	\$8,215,648	\$921,081,965
2016	\$53,523,467	\$48,589,204	\$446,510,072	\$408,115,361	\$0	\$0	\$6,842,661	\$963,580,765
2017	\$66,938,779	\$30,774,775	\$411,835,314	\$472,036,290	\$11,960	\$0	\$5,290,012	\$986,887,130
2018	\$85,618,391	\$26,920,766	\$407,499,716	\$522,306,290	\$220,394	\$25,858	\$4,234,283	\$1,046,825,697
Jan 2019	\$8,176	\$1,393	\$34,401,504	\$39,450,753	\$1,588,088	\$1,574,372	\$240,306	\$77,264,593
Feb 2019	\$0	\$0	\$28,987,864	\$42,900,116	\$1,432,260	\$800,815	\$481,480	\$74,602,535
Mar 2019	\$0	\$0	\$34,310,950	\$48,803,815	\$2,215,955	\$1,249,028	\$381,746	\$86,961,495
Apr 2019	\$0	\$0	\$35,411,765	\$52,115,085	\$1,921,228	\$1,486,254	\$478,217	\$91,412,548
May 2019	\$0	\$0	\$34,687,453	\$51,567,173	\$2,416,628	\$932,422	\$388,885	\$89,992,561
Jun 2019	\$0	\$0	\$37,115,010	\$54,481,453	\$2,649,617	\$963,604	\$298,140	\$95,507,824
Jul 2019	\$0	\$0	\$41,140,774	\$57,956,194	\$2,423,885	\$875,192	\$354,544	\$102,750,588
Aug 2019	\$0	\$0	\$38,534,380	\$55,290,475	\$2,605,993	\$1,120,124	\$544,505	\$98,095,478
Sep 2019	\$0	\$0	\$37,305,631	\$50,681,228	\$3,508,417	\$1,158,243	\$348,756	\$93,002,275
Oct 2019	\$0	\$0	\$39,330,532	\$60,616,252	\$3,008,906	\$1,098,562	\$435,448	\$104,489,700
Nov 2019	\$0	\$0	\$37,831,200	\$57,791,550	\$2,779,812	\$980,301	\$86,903	\$99,469,766
Dec 2019	\$0	\$0	\$42,168,268	\$64,576,004	\$2,972,272	\$1,120,931	\$261,288	\$111,098,763

\* Missing means the claims could not be tagged to a specific Health Plan.

**Claims Costs** *(continued)*

The following table represents Incurred Pharmacy Claims by Health Plan for 2014-2018 and monthly year-to-date for 2019.

INCURRED RX CLAIMS BY PLAN								
Time Period	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	LivingWell Basic CDHP	LW Limited High Deductible	Missing**	Total
2014	\$17,730,754	\$5,829,739	\$217,764,345	\$82,940,511	\$0	\$0	\$352,968	\$324,618,317
2015	\$16,014,926	\$6,904,578	\$201,586,203	\$98,816,804	\$0	\$0	\$76,235	\$323,398,746
2016	\$19,014,651	\$7,491,440	\$216,158,709	\$119,656,922	\$0	\$0	\$210,122	\$362,531,844
2017	\$22,801,969	\$4,760,588	\$217,240,015	\$154,801,085	\$0	\$5	\$81,691	\$399,685,354
2018	\$32,793,543	\$5,127,730	\$220,289,322	\$180,097,086	\$0	\$0	\$55,976	\$438,363,657
Jan 2019	\$36,700	\$333	\$20,799,086	\$15,050,069	\$364,994	\$246,857	\$20,224	\$36,518,263
Feb 2019	\$0	\$0	\$20,038,816	\$14,777,043	\$400,860	\$229,173	\$2,502	\$35,448,393
Mar 2019	\$0	\$0	\$21,248,329	\$17,764,227	\$499,850	\$228,804	\$4,682	\$39,745,891
Apr 2019	\$0	\$0	\$21,342,372	\$18,619,490	\$530,097	\$239,995	\$90,513	\$40,822,467
May 2019	\$0	\$0	\$21,245,426	\$19,170,647	\$505,690	\$273,133	\$32,115	\$41,227,010
Jun 2019	\$0	\$0	\$19,796,879	\$18,341,463	\$407,445	\$215,208	\$30,479	\$38,791,474
Jul 2019	\$0	\$0	\$21,298,473	\$20,402,384	\$416,752	\$288,582	\$6,331	\$42,412,522
Aug 2019	\$0	\$0	\$20,444,590	\$19,768,642	\$398,459	\$243,013	\$16,487	\$40,871,191
Sep 2019	\$0	\$0	\$20,106,840	\$20,026,346	\$477,114	\$235,420	\$11,029	\$40,856,749
Oct 2019	\$0	\$0	\$21,333,418	\$22,001,279	\$572,659	\$289,617	\$14,054	\$44,211,028
Nov 2019	\$0	\$0	\$20,318,251	\$20,713,678	\$448,907	\$299,505	\$22,332	\$41,802,673
Dec 2019	\$0	\$0	\$21,479,216	\$24,197,563	\$547,712	\$284,201	\$16,378	\$46,525,069

\*\*Missing means the claims could not be tagged to a specific Health Plan.

**Claims Costs** *(continued)*

The following represents Incurred Medical Claims by Coverage Level for 2014-2018 and monthly year-to-date for 2019.

<b>INCURRED MEDICAL CLAIMS BY COVERAGE LEVEL</b>						
<b>Time Period</b>	<b>Couple</b>	<b>Family</b>	<b>Parent Plus</b>	<b>Single</b>	<b>Unknown*</b>	<b>Total</b>
2014	\$131,271,014	\$239,094,807	\$182,552,523	\$524,850,024	\$8,215,648	\$1,085,984,016
2015	\$113,343,648	\$214,227,846	\$156,724,117	\$428,570,705	\$5,535,178	\$918,401,495
2016	\$115,908,780	\$234,298,626	\$158,406,884	\$450,029,689	\$5,028,505	\$963,672,484
2017	\$125,249,301	\$253,489,908	\$160,158,807	\$442,699,103	\$5,290,012	\$986,887,130
2018	\$134,718,484	\$270,193,404	\$170,293,655	\$467,385,872	\$4,234,283	\$1,046,825,697
Jan 2019	\$9,964,461	\$18,615,634	\$14,025,015	\$34,419,177	\$240,306	\$77,264,593
Feb 2019	\$9,256,176	\$20,825,263	\$12,081,049	\$31,958,567	\$481,480	\$74,602,535
Mar 2019	\$10,801,594	\$23,113,059	\$14,171,859	\$38,493,238	\$381,746	\$86,961,495
Apr 2019	\$12,178,739	\$24,266,637	\$14,295,475	\$40,193,481	\$478,217	\$91,412,548
May 2019	\$11,756,236	\$23,155,631	\$15,649,479	\$39,042,330	\$388,885	\$89,992,561
Jun 2019	\$12,078,370	\$24,169,674	\$16,725,910	\$42,235,731	\$298,140	\$95,507,824
Jul 2019	\$11,899,643	\$28,575,028	\$18,201,526	\$43,719,846	\$354,544	\$102,750,588
Aug 2019	\$13,105,516	\$26,981,372	\$15,739,223	\$41,724,861	\$544,505	\$98,095,478
Sep 2019	\$12,122,060	\$24,019,604	\$16,065,163	\$40,446,691	\$348,756	\$93,002,275
Oct 2019	\$13,379,263	\$27,075,823	\$18,262,108	\$45,337,057	\$435,448	\$104,489,700
Nov 2019	\$12,960,446	\$25,990,505	\$16,036,787	\$44,395,124	\$86,903	\$99,469,766
Dec 2019	\$13,558,694	\$29,819,366	\$19,163,555	\$48,295,860	\$261,288	\$111,098,763

\*Unable to tag claims to a specific coverage level

**Claims Costs** *(continued)*

The following represents Incurred Pharmacy Claims by Coverage Level for 2014-2018 and monthly year-to-date for 2019.

<b>INCURRED RX CLAIMS BY COVERAGE LEVEL</b>						
<b>Time Period</b>	<b>Couple</b>	<b>Family</b>	<b>Parent Plus</b>	<b>Single</b>	<b>Unknown*</b>	<b>Total</b>
2014	\$45,477,497	\$67,741,378	\$45,635,023	\$165,451,246	\$313,173	\$324,618,317
2015	\$42,957,491	\$68,806,053	\$45,211,695	\$166,347,272	\$76,235	\$323,398,746
2016	\$48,058,582	\$80,398,062	\$49,757,539	\$184,153,799	\$175,199	\$362,543,182
2017	\$52,795,745	\$92,113,848	\$55,352,719	\$199,341,350	\$81,691	\$399,685,354
2018	\$55,659,936	\$104,422,730	\$60,725,075	\$217,499,939	\$55,976	\$438,363,657
Jan 2019	\$4,593,928	\$8,508,687	\$5,179,259	\$18,216,165	\$20,224	\$36,518,263
Feb 2019	\$4,629,595	\$7,965,912	\$4,880,125	\$17,970,259	\$2,502	\$35,448,393
Mar 2019	\$5,334,672	\$9,667,369	\$5,544,594	\$19,194,575	\$4,682	\$39,745,891
Apr 2019	\$5,278,255	\$9,435,049	\$5,934,578	\$20,084,072	\$90,513	\$40,822,467
May 2019	\$5,403,516	\$10,030,784	\$5,745,299	\$20,015,296	\$32,115	\$41,227,010
Jun 2019	\$5,309,592	\$9,269,765	\$5,554,462	\$18,627,175	\$30,479	\$38,791,474
Jul 2019	\$5,684,246	\$10,046,181	\$6,127,486	\$20,548,278	\$6,331	\$42,412,522
Aug 2019	\$5,091,689	\$10,488,398	\$5,796,744	\$19,477,872	\$16,487	\$40,871,191
Sep 2019	\$5,421,219	\$9,865,086	\$5,910,075	\$19,649,340	\$11,029	\$40,856,749
Oct 2019	\$5,905,106	\$10,907,871	\$6,540,975	\$20,843,022	\$14,054	\$44,211,028
Nov 2019	\$5,226,295	\$10,709,252	\$6,217,870	\$19,626,924	\$22,332	\$41,802,673
Dec 2019	\$6,021,429	\$12,158,289	\$7,042,057	\$21,286,916	\$16,378	\$46,525,069

\*Unable to tag claims to a specific coverage level

## Medical Claims Utilization

The following is based on Incurred Medical Claims\* from Jan-Dec 2019.

Plan	Admits Per 1000 Acute	Admits Per 1000 Acute Rcnt SGovt	% Diff from Rcnt SGovt	Days LOS per Admit Acute	Days LOS per Admit Acute Rcnt SGovt	% Diff from Rcnt SGovt	Days Per 1000 Admits Acute	Days Per 1000 Admits Acute Rcnt SGovt	% Diff from Rcnt SGovt
LivingWell CDHP	57.48	55.90	2.83%	4.28	4.29	-0.02%	246.26	247.86	-0.64%
LivingWell PPO	67.32	58.39	15.30%	4.58	4.61	-0.66%	308.27	270.17	14.10%
LW Limited High Deductible	73.98	61.30	20.68%	6.49	6.03	7.49%	479.78	278.63	72.19%
LivingWell Basic CDHP	35.99	54.34	-33.76%	4.57	4.13	10.66%	164.40	235.32	-30.14%
<b>Average</b>	<b>59.66</b>	<b>56.68</b>	<b>5.27%</b>	<b>4.44</b>	<b>4.43</b>	<b>0.24%</b>	<b>264.77</b>	<b>254.69</b>	<b>3.96%</b>

Plan	Visits Per 1000 Office	Visits Per 1000 Office Rcnt US	% Diff from Rcnt US	Visits Per 1000 ER	Visits Per 1000 ER Rcnt US	% Diff from Rcnt US
LivingWell CDHP	8,211.60	6,770.72	17.55%	189.93	226.85	-19.44%
LivingWell PPO	9,656.47	7,516.39	22.16%	215.41	229.84	-6.70%
LW Limited High Deductible	4,819.71	7,232.26	-50.06%	316.71	233.62	26.23%
LivingWell Basic CDHP	4,931.27	6,562.60	-33.08%	165.94	228.27	-37.56%
<b>Average</b>	<b>8,444.27</b>	<b>7,002.50</b>	<b>17.07%</b>	<b>198.50</b>	<b>227.97</b>	<b>-14.85%</b>

### Notes:

Rcnt SGovt—Recent State Government

Rcnt US—Recent US

LOS—Length of Stay

OP—Outpatient

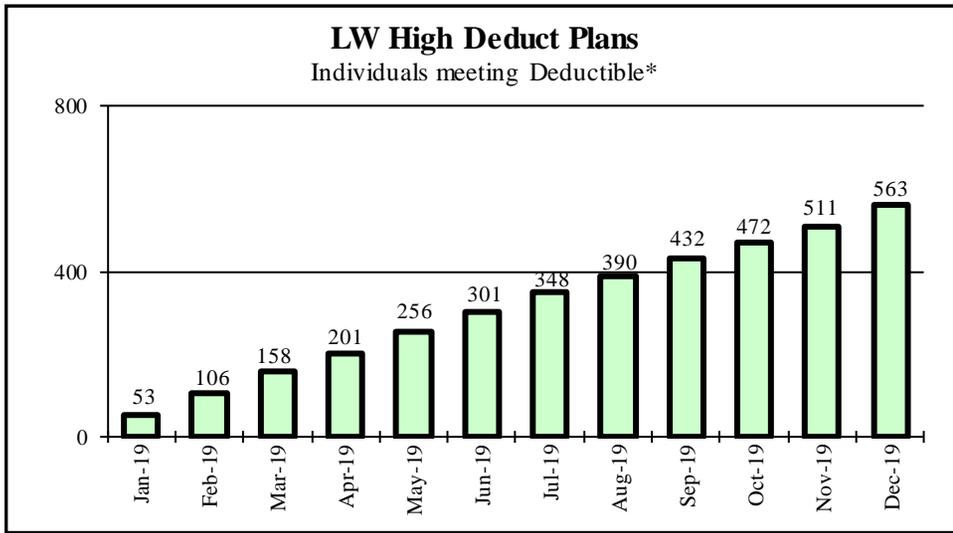
OP Rad—Outpatient Radiology

Plan	Svcs Per 1000 OP Lab	Svcs Per 1000 OP Lab Rcnt US	% Diff from Rcnt US	Svcs Per 1000 OP Rad	Svcs Per 1000 OP Rad Rcnt US	%Diff from Rcnt US
LivingWell CDHP	8,654.75	7,982.40	8.42%	2,303.40	1,918.56	20.06%
LivingWell PPO	11,251.18	9,189.26	22.44%	3,023.42	2,386.35	26.70%
LW Limited High Deductible	7,927.10	9,430.44	-15.94%	2,092.47	2,232.58	-6.28%
LivingWell Basic CDHP	5,821.93	8,029.88	-27.50%	1,521.34	1,873.50	-18.80%
<b>Average</b>	<b>9,314.70</b>	<b>8,388.27</b>	<b>11.04%</b>	<b>2,486.42</b>	<b>2,068.96</b>	<b>20.18%</b>

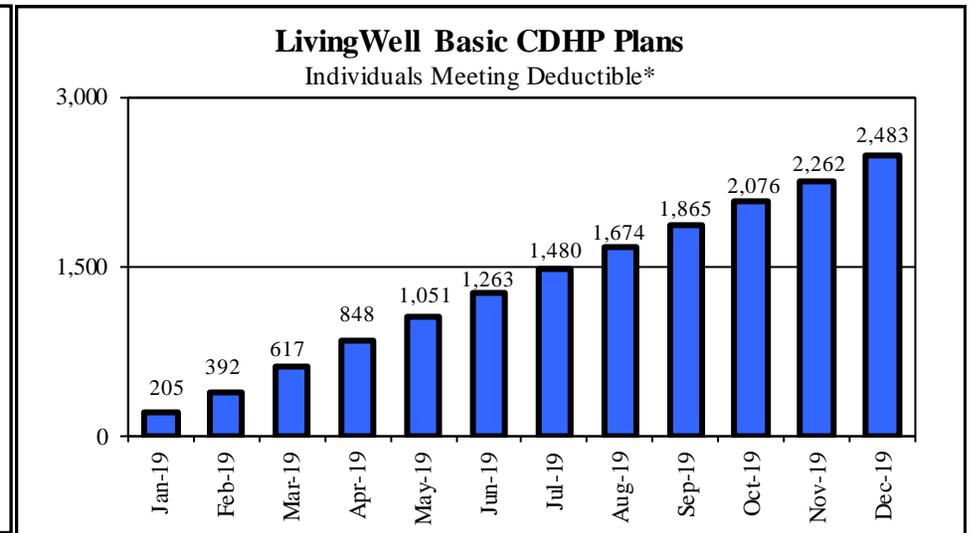
\*Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

## Analysis of Individuals and Families Meeting Their Deductibles

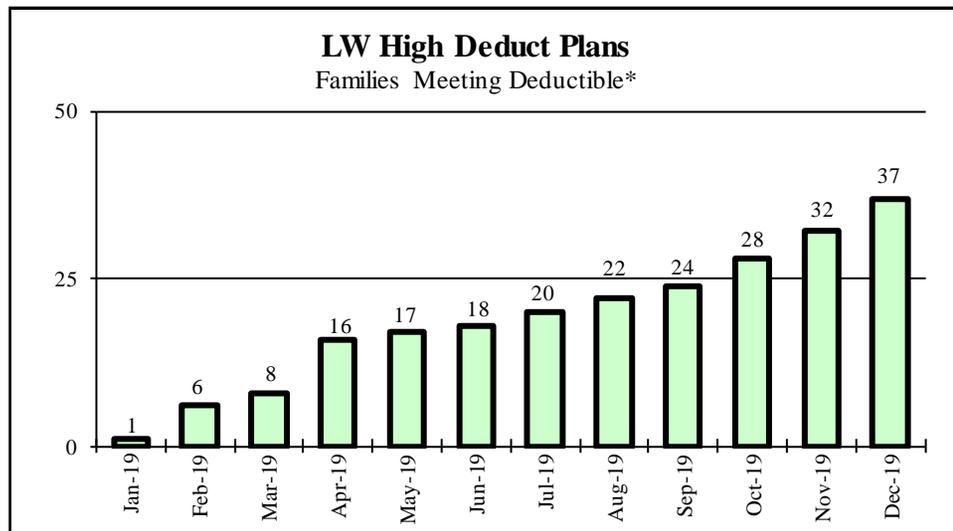
The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.



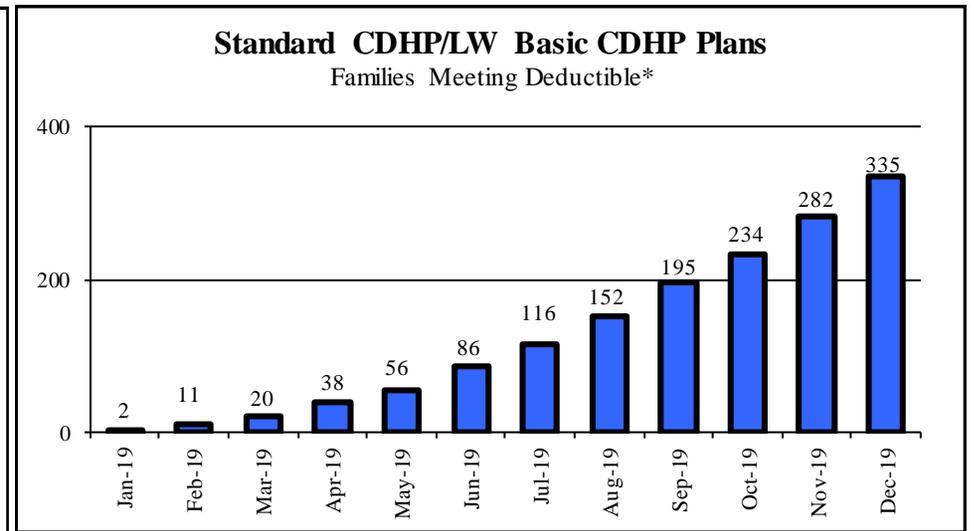
\* 2019 LW High Deduct Individual Deductible is \$4,000



\* 2019 LivingWell Basic Individual Deductible is \$1,750



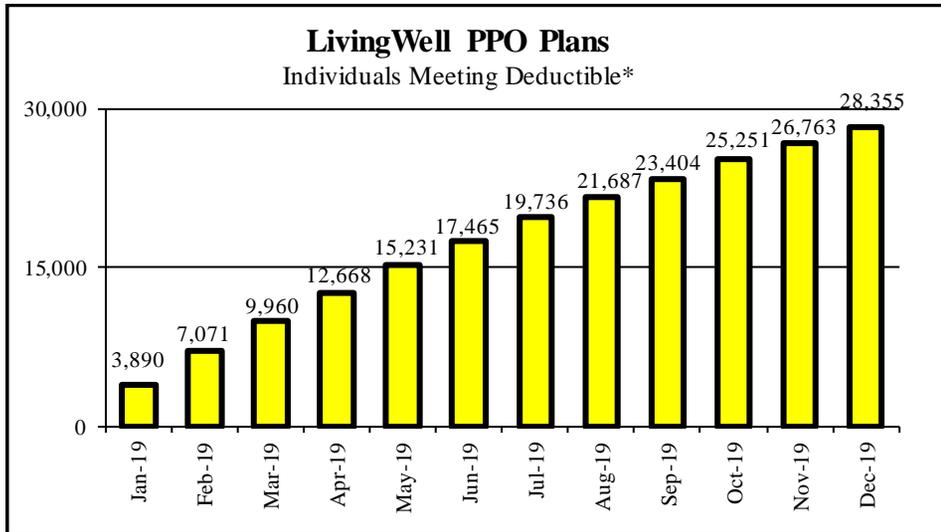
\* 2019 LW High Deduct Family Deductible is \$8,000



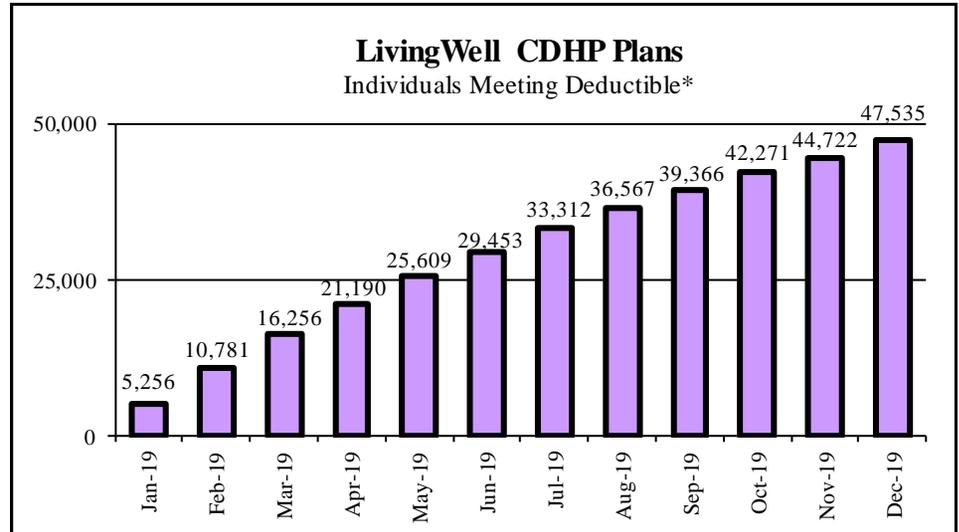
\* 2019 LivingWell Basic Family Deductible is \$3,500

## Analysis of Individuals and Families Meeting Their Deductibles (continued)

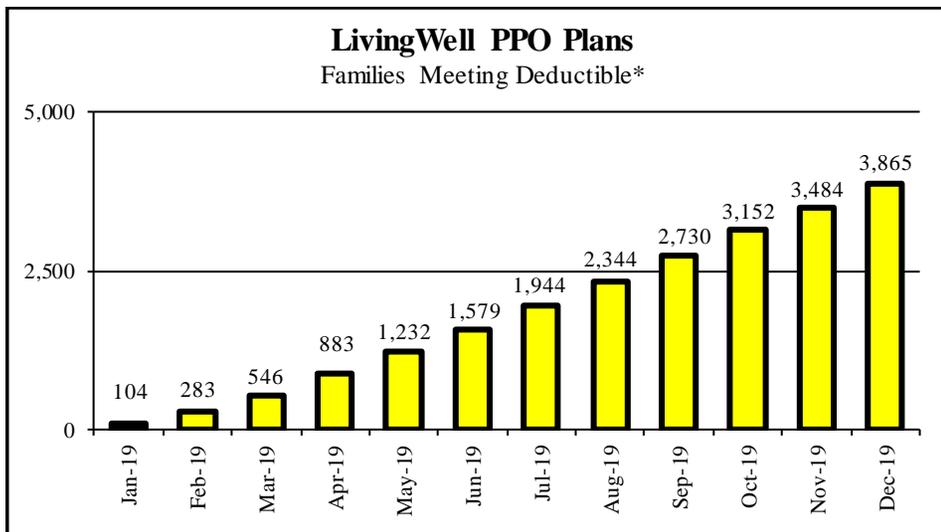
The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.



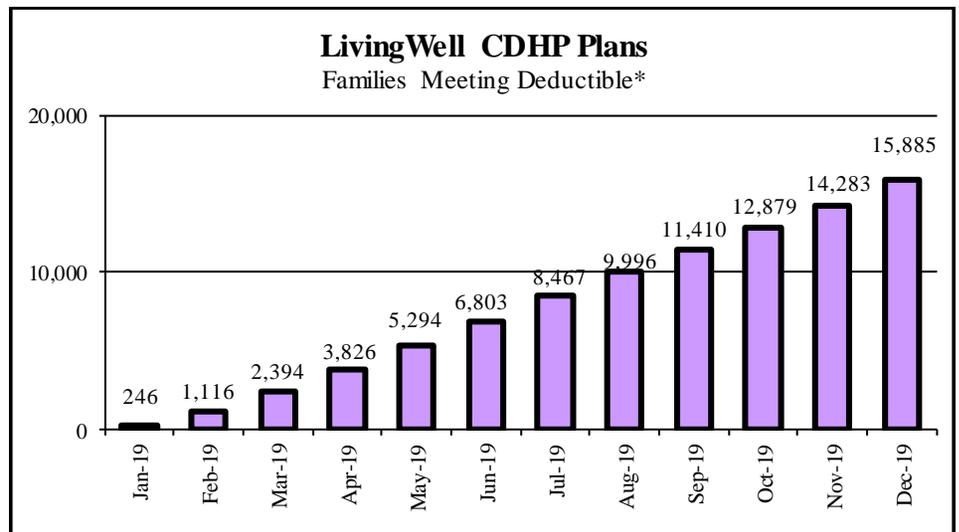
\*2019 LivingWell PPO Individual Deductible is \$750



\* 2019 LivingWell CDHP Individual Deductible is \$1,250



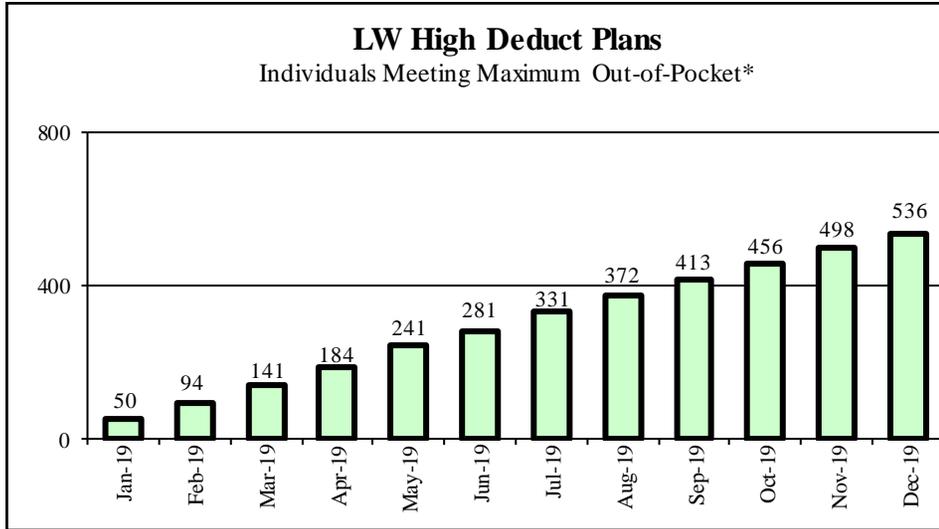
\* 2019 LivingWell PPO Family Deductible is \$1,500



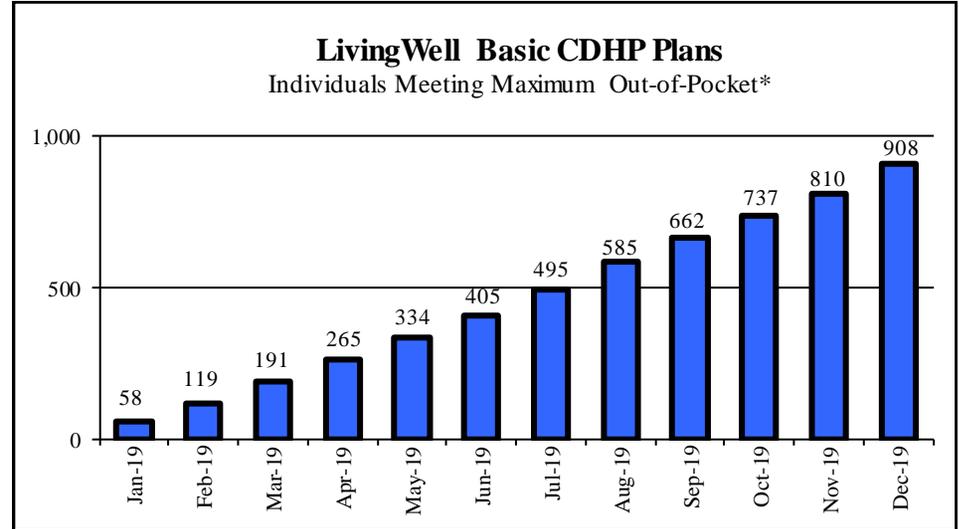
\* 2019 LivingWell CDHP Family Deductible is \$2,500

## Analysis of Individuals and Families Meeting Their Maximum Out-of-Pocket Expenses

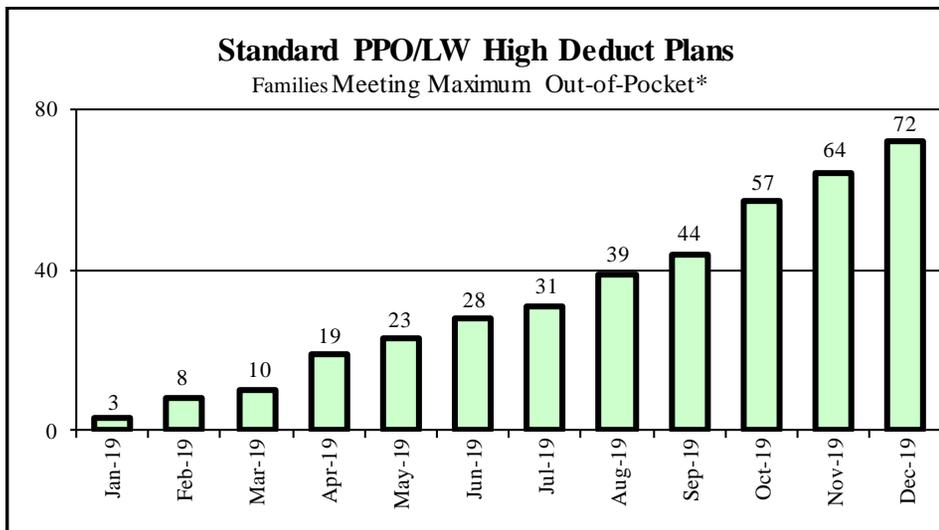
The following details the number of individuals and families by Health Plan that met their maximum out-of-pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.



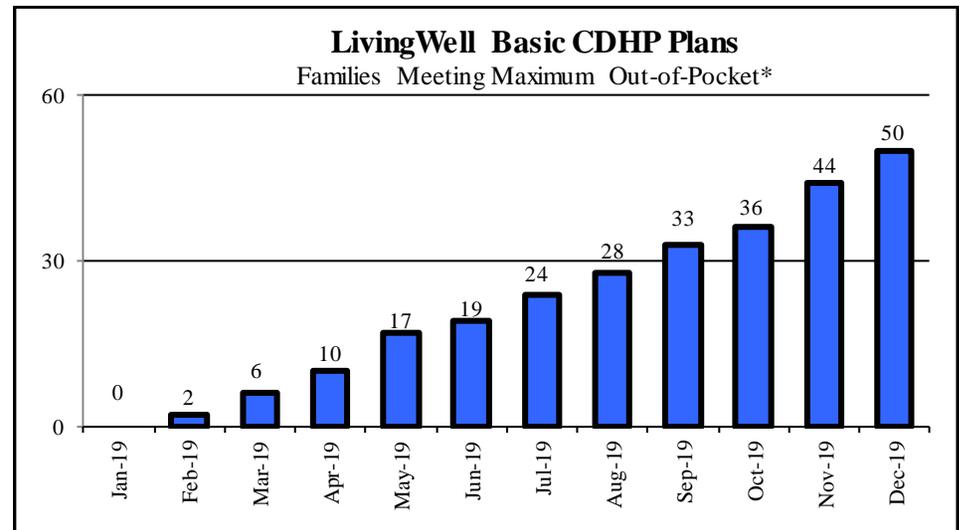
\* 2019 LW High Deduct Individual MOOP is \$5,000



\* 2019 LivingWell Basic CDHP Individual MOOP is \$3,750



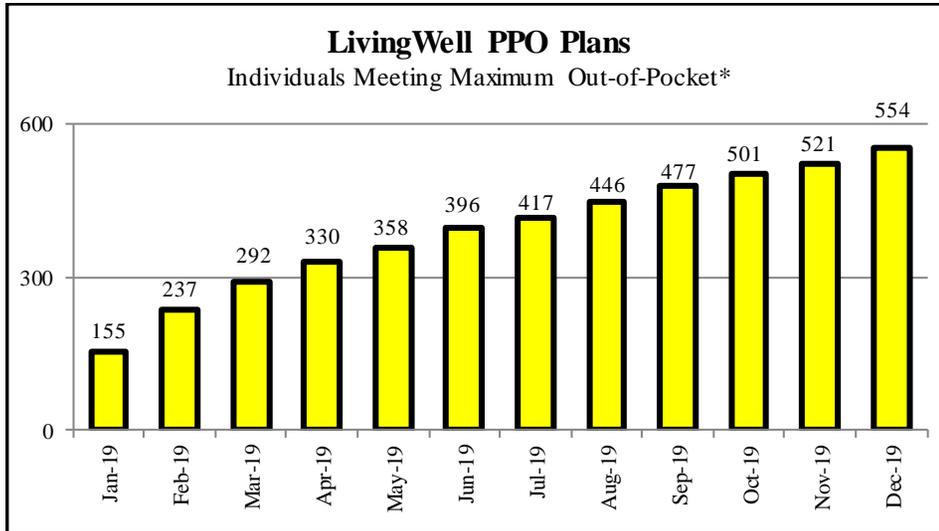
\* 2019 LW High Deduct Family MOOP is \$10,000



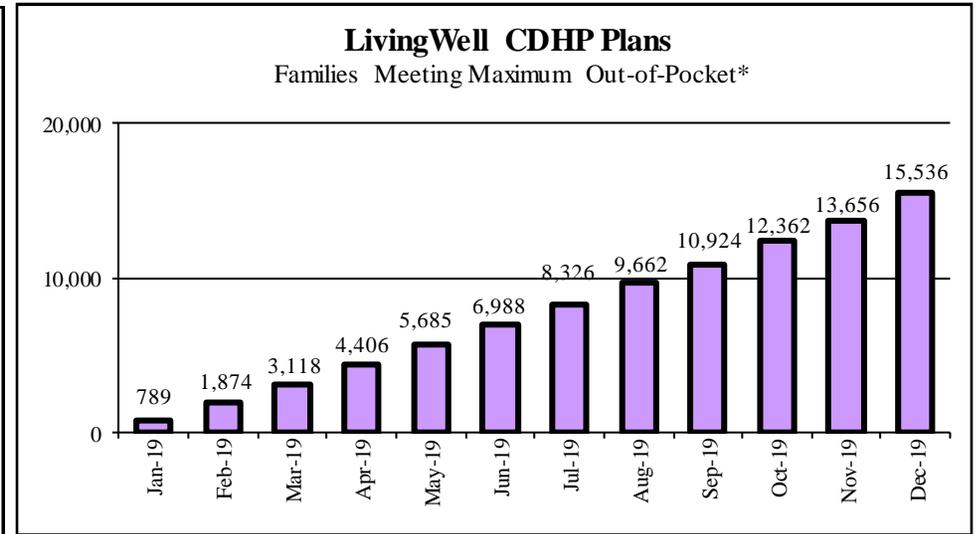
\* 2019 LivingWell Basic CDHP Family MOOP is \$7,500

## Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses (continued)

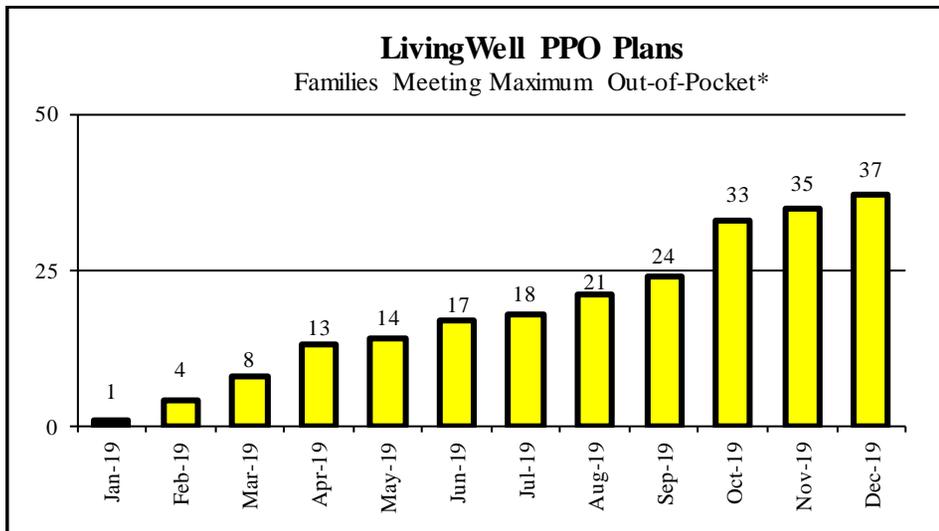
The following details the number of individuals and families by Health Plan that met their maximum out of pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.



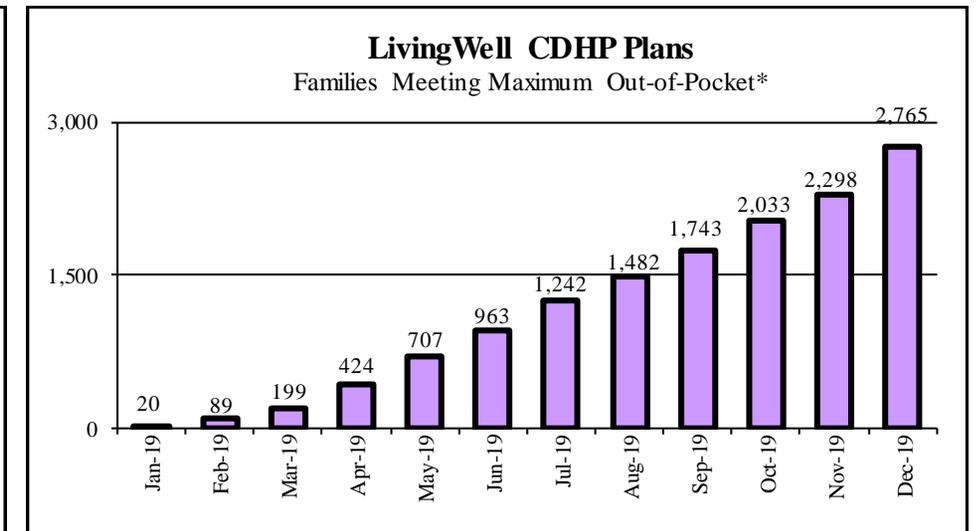
\* 2019 LivingWell PPO Individual Maximum Out of Pocket is \$2,750



\* 2019 LivingWell CDHP Individual Maximum Out of Pocket is \$2,750



\* 2019 LivingWell PPO Family Maximum Out of Pocket is \$5,500



\* 2019 LivingWell CDHP Family Maximum Out of Pocket is \$5,500

## Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket Expenses

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2019. This report is based on Incurred Medical and Pharmacy claims.

<b>Individuals and Families in Standard PPO (2014—2018) and LW High Deduct (2019-Present)</b>									
		<b>Individuals</b>				<b>Families</b>			
<b>Plan year</b>	<b>Plan Name</b>	<b>Deductible</b>	<b>Meeting Deductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>	<b>Deductible</b>	<b>Meeting Deductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>
2014	Standard PPO	\$750	<b>34.91%</b>	\$3,500	<b>6.82%</b>	\$1,500	<b>10.68%</b>	\$7,000	<b>0.82%</b>
2015	Standard PPO	\$750	<b>33.28%</b>	\$3,500	<b>5.31%</b>	\$1,500	<b>9.53%</b>	\$7,000	<b>0.30%</b>
2016	Standard PPO	\$750	<b>34.21%</b>	\$3,500	<b>5.85%</b>	\$1,500	<b>10.07%</b>	\$7,000	<b>0.39%</b>
2017	Standard PPO	\$750	<b>35.00%</b>	\$3,750	<b>6.95%</b>	\$1,500	<b>7.06%</b>	\$7,500	<b>0.30%</b>
2018	Standard PPO	\$750	<b>36.19%</b>	\$3,750	<b>10.40%</b>	\$1,500	<b>7.62%</b>	\$7,500	<b>0.29%</b>
2019	LW High Deduct	\$4,000	<b>15.20%</b>	\$5,000	<b>14.47%</b>	\$8,000	<b>0.76%</b>	\$10,000	<b>1.48%</b>

<b>Individuals and Families in Standard CDHP (2014—2018) and LW Basic CDHP (2019-Present)</b>									
		<b>Individuals</b>				<b>Families</b>			
<b>Plan year</b>	<b>Plan Name</b>	<b>Deductible</b>	<b>Meeting De-ductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>	<b>Deductible</b>	<b>Meeting De-ductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>
2014	Standard CDHP	\$1,750	<b>20.45%</b>	\$3,500	<b>7.38%</b>	\$3,500	<b>2.41%</b>	\$7,000	<b>0.47%</b>
2015	Standard CDHP	\$1,750	<b>18.67%</b>	\$3,500	<b>6.90%</b>	\$3,500	<b>1.88%</b>	\$7,000	<b>0.34%</b>
2016	Standard CDHP	\$1,750	<b>19.69%</b>	\$3,500	<b>7.96%</b>	\$3,500	<b>2.17%</b>	\$7,000	<b>0.47%</b>
2017	Standard CDHP	\$1,750	<b>16.92%</b>	\$3,750	<b>6.35%</b>	\$3,500	<b>2.38%</b>	\$7,500	<b>0.42%</b>
2018	Standard CDHP	\$1,750	<b>17.68%</b>	\$3,750	<b>6.66%</b>	\$3,500	<b>2.73%</b>	\$7,500	<b>0.77%</b>
2019	LW Basic CDHP	\$1,750	<b>17.32%</b>	\$3,750	<b>6.33%</b>	\$3,500	<b>3.18%</b>	\$7,500	<b>0.47%</b>

**Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket Expenses** *(continued)*

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2019 This report is based on Incurred Medical and Pharmacy claims.

<b>Individuals and Families in LivingWell PPO (2014—Present )</b>									
		<b>Individuals</b>				<b>Families</b>			
<b>Plan year</b>	<b>Plan Name</b>	<b>Deductible</b>	<b>Meeting De-ductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>	<b>Deductible</b>	<b>Meeting De-ductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>
2014	LivingWell PPO	\$500	<b>11.85%</b>	\$2,500	<b>3.74%</b>	\$1,000	<b>4.70%</b>	\$3,000	<b>0.49%</b>
2015	LivingWell PPO	\$500	<b>34.97%</b>	\$2,500	<b>0.69%</b>	\$1,000	<b>7.88%</b>	\$5,000	<b>0.16%</b>
2016	LivingWell PPO	\$500	<b>35.87%</b>	\$2,500	<b>0.65%</b>	\$1,000	<b>7.87%</b>	\$5,000	<b>0.13%</b>
2017	LivingWell PPO	\$750	<b>32.00%</b>	\$2,750	<b>0.65%</b>	\$1,500	<b>6.38%</b>	\$5,500	<b>0.08%</b>
2018	LivingWell PPO	\$750	<b>32.74%</b>	\$2,750	<b>0.74%</b>	\$1,500	<b>6.38%</b>	\$5,500	<b>0.07%</b>
2019	LivingWell PPO	\$750	<b>33.88%</b>	\$2,750	<b>0.66%</b>	\$1,500	<b>6.62%</b>	\$5,500	<b>0.06%</b>

<b>Individuals and Families in LivingWell CDHP (2014— Present)</b>									
		<b>Individuals</b>				<b>Families</b>			
<b>Plan year</b>	<b>Plan Name</b>	<b>Deductible</b>	<b>Meeting De-ductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>	<b>Deductible</b>	<b>Meeting De-ductible</b>	<b>MOOP</b>	<b>Meeting MOOP</b>
2014	LivingWell CDHP	\$1,250	<b>29.04%</b>	\$2,500	<b>8.89%</b>	\$2,500	<b>17.39%</b>	\$5,000	<b>2.24%</b>
2015	LivingWell CDHP	\$1,250	<b>29.30%</b>	\$2,500	<b>8.61%</b>	\$2,500	<b>17.55%</b>	\$5,000	<b>1.89%</b>
2016	LivingWell CDHP	\$1,250	<b>28.69%</b>	\$2,500	<b>9.17%</b>	\$2,500	<b>17.90%</b>	\$5,000	<b>2.35%</b>
2017	LivingWell CDHP	\$1,250	<b>28.23%</b>	\$2,750	<b>8.51%</b>	\$2,500	<b>17.56%</b>	\$5,500	<b>2.59%</b>
2018	LivingWell CDHP	\$1,250	<b>28.80%</b>	\$2,750	<b>8.97%</b>	\$2,500	<b>18.48%</b>	\$5,500	<b>3.04%</b>
2019	LivingWell CDHP	\$1,250	<b>0.77%</b>	\$2,750	<b>9.59%</b>	\$2,500	<b>18.67%</b>	\$5,500	<b>3.25%</b>

## **Premium**

The following details the amount of premium\* paid by the employee and employer for 2014-2019 and monthly through 2020.

<b>Time Period</b>	<b>Employee Premium Amount</b>	<b>Employer Premium Amount</b>	<b>Total Premium Amount</b>
2014	\$265,431,508	\$1,348,631,926	\$1,614,063,434
2015	\$256,371,746	\$1,362,686,924	\$1,619,058,670
2016	\$254,661,768	\$1,380,830,820	\$1,635,492,588
2017	\$255,169,294	\$1,374,862,647	\$1,630,031,942
2018	\$262,595,375	\$1,384,164,265	\$1,646,759,641
2019	\$265,841,372	\$1,373,033,885	\$1,638,875,257
Jan 2020	\$23,238,148	\$114,593,946	\$137,832,095
Feb 2020	\$23,159,493	\$114,338,727	\$137,498,221
Mar 2020	\$23,187,743	\$114,388,728	\$137,576,472

*\*Premium is based on enrollment using published premium rates—it is NOT based on actual payments received.*

**Prescription Drug Utilization** *(continued)*

The following details the type of prescription filled, the percent that were generic, and the generic efficiency percentage for the most recent rolling year. Based on Paid Pharmacy Claims.

<b>Time Period: Paid Month</b>	<b>Generic</b>	<b>Brand Name, Generic Available</b>	<b>Brand Name</b>	<b>Other*</b>	<b>Total</b>	<b>Scripts Rx % Generic</b>	<b>Scripts Generic Efficiency Rx**</b>
Apr 2019	307,560	4,858	34,307	11,454	358,179	85.87%	98.45%
May 2019	314,948	4,818	35,225	11,767	366,758	85.87%	98.49%
Jun 2019	286,786	4,430	32,512	10,836	334,564	85.72%	98.48%
Jul 2019	306,323	4,812	33,930	11,603	356,668	85.88%	98.45%
Aug 2019	299,207	4,659	32,894	11,746	348,506	85.85%	98.47%
Sep 2019	296,485	4,343	41,195	11,086	353,109	83.96%	98.56%
Oct 2019	314,902	4,451	57,867	11,894	389,114	80.93%	98.61%
Nov 2019	308,907	4,253	38,810	11,548	363,518	84.98%	98.64%
Dec 2019	343,345	4,710	36,911	12,908	397,874	86.29%	98.65%
Jan 2020	324,152	5,844	31,285	12,487	373,768	86.73%	98.23%
Feb 2020	302,564	5,590	27,709	11,450	347,313	87.12%	98.19%
Mar 2020	329,122	6,228	32,665	13,654	381,669	86.23%	98.14%

*\*Other category includes: Over-the-Counter (usually items such as diabetic supplies, syringes, and test strips, etc.) and claims that were unable to be tagged to a specific group.*

*\*\*Generic Efficiency Rate means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.*

**Prescription Drug Utilization** (continued)

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Pharmacy Claims.

Time Period	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt* Per Script	Net Pay Per Script	Member Cost Per Script**	Patient Cost Per Script***
Jan 2019	265,184	164,135	386,932	1.46	2.88	\$115.53	\$94.38	\$30.39	\$49.10
Feb 2019	264,795	158,654	349,364	1.32	2.71	\$120.29	\$101.47	\$24.38	\$40.70
Mar 2019	265,692	159,733	374,335	1.41	2.85	\$123.01	\$106.18	\$23.17	\$38.54
Apr 2019	264,179	155,706	357,796	1.35	2.83	\$129.26	\$114.09	\$20.00	\$33.93
May 2019	264,144	155,584	364,692	1.38	2.86	\$126.21	\$113.05	\$17.53	\$29.77
Jun 2019	263,724	150,910	334,844	1.27	2.76	\$128.26	\$115.85	\$15.23	\$26.61
Jul 2019	262,851	156,182	355,697	1.35	2.88	\$131.34	\$119.24	\$15.83	\$26.64
Aug 2019	261,307	153,866	348,606	1.33	2.82	\$128.36	\$117.24	\$14.19	\$24.11
Sep 2019	260,361	155,454	353,552	1.36	2.81	\$125.77	\$115.56	\$13.33	\$22.32
Oct 2019	264,145	171,474	389,767	1.48	2.88	\$122.90	\$113.43	\$13.51	\$20.81
Nov 2019	264,321	161,020	360,068	1.36	2.78	\$125.39	\$116.10	\$12.12	\$19.90
Dec 2019	264,585	161,347	396,836	1.50	2.96	\$126.43	\$117.24	\$13.31	\$21.82

\*\*Allow Amt\*\* is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.

\*\*\*Member Cost per Script\*\* is the average net amount paid per prescription filled per member (Net Pay Rx/Members)

\*\*\*Patient Cost per Script\*\* is the average net amount paid per prescription filled per Patients (Net Pay Rx/Patients)

**Prescription Drug Utilization** *(continued)*

The following Top 25 Drug Analysis is based on Incurred Pharmacy Claims from Jan-Dec 2019.

Prev Rank	Curr Rank	Product Name*	Brand/Generic	Therapeutic Class General	Net Pay Rx	Net Pay Rx as % of All Drugs	Scripts Rx	Net Pay Per Day Supply Rx	Patients Rx
1	1	HUMIRA	Single source brand	Immunosuppressants	\$35,624,114.07	\$0.07	4,756	\$193.22	826
2	2	STELARA	Single source brand	Immunosuppressants	\$13,613,899.99	\$0.03	798	\$254.15	222
3	3	ENBREL	Single source brand	Immunosuppressants	\$11,423,583.15	\$0.02	1,565	\$175.83	297
4	4	TRULICITY	Single source brand	Hormones & Synthetic Subst	\$10,117,323.26	\$0.02	11,717	\$24.45	1,801
6	5	JANUVIA	Single source brand	Hormones & Synthetic Subst	\$9,568,694.83	\$0.02	15,522	\$13.29	2,954
5	6	FARXIGA	Single source brand	Hormones & Synthetic Subst	\$9,519,856.36	\$0.02	14,110	\$14.54	2,449
7	7	TRESIBA	Single source brand	Hormones & Synthetic Subst	\$8,403,149.28	\$0.02	9,200	\$21.15	1,810
8	8	SAXENDA	Single source brand	Hormones & Synthetic Subst	\$8,225,248.12	\$0.02	7,021	\$35.94	1,743
9	9	NOVOLOG	Single source brand	Hormones & Synthetic Subst	\$7,307,592.73	\$0.02	6,802	\$25.72	1,266
10	10	VICTOZA	Single source brand	Hormones & Synthetic Subst	\$7,049,633.57	\$0.01	6,962	\$25.56	1,269
11	11	NOVOLOG FLEXPEN	Single source brand	Hormones & Synthetic Subst	\$6,984,753.06	\$0.01	7,400	\$22.60	1,876
12	12	DUEXIS	Single source brand	Central Nervous System	\$6,672,372.56	\$0.01	3,056	\$71.27	691
13	13	TECFIDERA	Single source brand	Misc Therapeutic Agents	\$6,153,442.99	\$0.01	527	\$243.76	89
14	14	COSENTYX	Single source brand	Immunosuppressants	\$5,869,465.66	\$0.01	877	\$193.04	148
15	15	GILENYA	Single source brand	Misc Therapeutic Agents	\$5,705,063.68	\$0.01	390	\$260.15	76
17	16	HUMATROPE	Multisource brand, no generic	Hormones & Synthetic Subst	\$5,121,506.06	\$0.01	497	\$202.83	106
16	17	ROSUVASTATIN CALCIUM	Multisource generic	Cardiovascular Agents	\$5,094,499.67	\$0.01	36,998	\$2.55	8,357
18	18	JARDIANCE	Single source brand	Hormones & Synthetic Subst	\$4,933,462.78	\$0.01	7,735	\$14.68	1,532
19	19	OTEZLA	Single source brand	Misc Therapeutic Agents	\$4,210,499.80	\$0.01	1,139	\$102.97	234
21	20	ELIQUIS	Single source brand	Blood Form/Coagul Agents	\$4,072,267.57	\$0.01	8,098	\$13.07	1,569
20	21	XOLAIR	Single source brand	Immunosuppressants	\$3,938,072.05	\$0.01	1,093	\$104.52	185
22	22	XARELTO	Single source brand	Blood Form/Coagul Agents	\$3,725,341.39	\$0.01	7,213	\$13.06	1,367
23	23	TALTZ	Single source brand	Immunosuppressants	\$3,601,480.76	\$0.01	529	\$208.66	88
24	24	VYVANSE	Single source brand	Central Nervous System	\$3,579,767.39	\$0.01	15,703	\$7.54	2,572
25	25	LEVEMIR FLEXTOUCH	Single source brand	Hormones & Synthetic Subst	\$3,448,666.41	\$0.01	4,655	\$17.54	941

\*"Product Name" includes all strengths/formulations of a drug.

**Prescription Drug Utilization** *(continued)*

In summary, the top 25 drugs represent 4.03% of total scripts and 39.93% of total Pharmacy expenditures.

Summary	Net Pay Rx	Scripts Rx	Days Supply Rx
Top Drugs	\$193,963,757	174,363	7,482,860
All Product Names	\$485,764,221	4,328,751	157,143,397
Top Drugs as Pct of All Drugs	39.93%	4.03%	4.76%

## Utilization

The top 25 clinical conditions based on Incurred Medical Claims for Jan-Dec 2019.

Prev Rank	Curr Rank	Clinical Condition	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER	Patients Med	Net Pay Per Pat Med
1	1	Prevent/Admin Hlth Encounters	\$87,963,344	\$366,514	\$87,449,295	0.00	0.00	1269.44	0.40	187,343	\$469.53
2	2	Osteoarthritis	\$50,184,895	\$25,571,931	\$24,581,299	3.12	1.54	138.97	0.27	17,432	\$2,878.89
3	3	Chemotherapy Encounters	\$42,221,923	\$4,096,175	\$38,125,748	0.50	5.90	1.35	0.01	812	\$51,997.44
4	4	Signs/Symptoms/Oth Cond, NEC	\$41,998,189	\$7,084,317	\$34,570,840	0.90	6.33	439.98	10.14	86,340	\$486.43
5	5	Coronary Artery Disease	\$33,125,213	\$18,350,716	\$14,733,943	1.81	3.93	28.41	2.09	5,465	\$6,061.34
6	6	Spinal/Back Disord, Low Back	\$31,238,758	\$13,812,449	\$17,367,729	0.79	3.27	591.53	3.61	31,845	\$980.96
7	7	Pregnancy without Delivery	\$29,591,808	\$22,319,355	\$7,271,557	0.59	3.05	82.13	5.78	5,552	\$5,329.94
8	8	Arthropathies/Joint Disord NEC	\$28,051,798	\$2,120,987	\$25,853,577	0.29	2.84	604.84	6.16	53,516	\$524.18
9	9	Respiratory Disord, NEC	\$27,265,657	\$9,999,009	\$17,178,333	0.39	4.45	83.65	9.30	26,034	\$1,047.31
10	10	Gastroint Disord, NEC	\$26,492,675	\$5,948,854	\$20,517,196	1.02	3.81	138.18	15.61	34,487	\$768.19
11	11	Infections, NEC	\$22,933,180	\$20,748,844	\$2,163,585	0.14	3.95	75.12	2.67	19,680	\$1,165.30
12	12	Condition Rel to Tx - Med/Surg	\$22,718,315	\$16,228,687	\$6,425,375	1.66	5.22	6.47	2.12	5,226	\$4,347.17
13	13	Cardiac Arrhythmias	\$20,916,818	\$5,929,410	\$14,981,671	0.80	3.14	34.51	2.15	6,980	\$2,996.68
14	14	Newborns, w/wo Complication	\$19,088,700	\$18,512,285	\$565,876	8.88	3.08	7.70	0.24	2,887	\$6,611.95
15	15	Diabetes	\$17,357,641	\$4,313,991	\$13,020,906	1.70	5.77	235.18	1.80	28,361	\$612.02
16	16	Spinal/Back Disord, Ex Low	\$17,331,980	\$4,073,626	\$13,257,878	0.30	4.37	535.86	2.91	25,788	\$672.09
17	17	Cancer - Breast	\$16,550,276	\$635,230	\$15,878,440	0.09	3.44	20.21	0.02	2,265	\$7,306.97
18	18	Cerebrovascular Disease	\$15,929,632	\$11,399,316	\$4,376,937	1.46	7.16	7.79	1.43	2,117	\$7,524.63
19	19	Renal Function Failure	\$15,562,422	\$3,455,965	\$12,069,036	0.25	6.03	14.86	0.75	3,061	\$5,084.10
20	20	Neurological Disorders, NEC	\$14,197,866	\$6,343,610	\$7,725,581	0.60	9.46	69.39	1.25	9,197	\$1,543.75
21	21	Cardiovasc Disord, NEC	\$13,868,105	\$1,989,723	\$11,870,195	0.30	5.38	67.58	8.79	18,566	\$746.96
22	22	Hypertension, Essential	\$13,497,915	\$7,439,432	\$6,030,786	0.90	6.09	262.26	3.03	44,966	\$300.18
23	23	ENT Disorders, NEC	\$13,222,918	\$1,724,587	\$11,495,347	0.06	15.93	644.62	2.06	43,478	\$304.13
25	24	Infections - ENT Ex Otitis Med	\$13,160,491	\$465,630	\$12,675,145	0.15	2.88	595.42	5.61	96,423	\$136.49
24	25	Urinary Tract Calculus	\$12,816,839	\$1,110,029	\$11,706,746	0.52	2.70	18.67	5.77	4,132	\$3,101.85

NOTE: Medical payments represent only the payments made for the specified condition.

**Utilization** (continued)

In Summary, the top clinical conditions represent more than 57.55% of total Paid Medical Claims for all clinical conditions.

Summary	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
Top Clinical Conditions	\$647,287,358	\$214,040,672	\$431,893,024	27.20	4.79	5,974.10	93.95
All Clinical Conditions	\$1,124,648,126	\$352,263,507	\$769,142,101	62.08	5.05	9,609.87	199.93
Top Clinical Conditions as Pct of All Clinical Conditions	57.55%	60.76%	56.15%	43.82%	94.91%	62.17%	46.99%

## **Claims Lag Analysis**

The following claims lag information is based on Incurred Medical Claims from Jan-Dec 2019.

<b>Plan</b>	<b>Number of Medical Claims</b>	<b>Avg Days Lag Per Claim</b>	<b>% Claims Paid Within 30 Days</b>	<b>% Claims Paid Within 60 Days</b>	<b>% Claims Paid Within 90 Days</b>
LivingWell CDHP	4,975,754	17	90.12%	97.35%	99.09%
LivingWell PPO	3,242,908	17	90.21%	97.49%	99.13%
Standard CDHP	101	23	84.38%	96.88%	96.88%
Standard PPO	163	81	52.63%	63.16%	78.95%
LW Limited High Deductible	100,158	26	82.17%	93.69%	97.53%
LivingWell Basic CDHP	273,341	18	88.44%	96.47%	98.71%
Missing	14,432	25	81.37%	95.70%	97.87%
All Plans	8,606,857	17	89.94%	97.30%	99.05%

*\*Missing means the claims could not be tagged to a specific plan.*

**Claims Lag Analysis** *(continued)*

The following claims lag information is based on all claims (**Medical and Pharmacy**) incurred and paid during the most recent rolling year.

Service Month	Month Paid					
	Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019
Jan 2019	\$3,717,556.35	\$2,316,193.34	\$722,871.96	\$295,370.67	(\$43,235.26)	\$427,497.40
Feb 2019	\$7,548,056.83	\$4,692,712.41	\$875,283.67	\$269,384.99	\$417,458.26	\$42,958.12
Mar 2019	\$38,590,281.35	\$10,525,191.42	\$3,027,820.68	\$1,625,234.31	\$900,583.03	\$547,909.93
Apr 2019	\$66,370,775.28	\$48,776,834.61	\$9,021,326.63	\$4,105,353.74	\$1,200,509.27	\$976,188.48
May 2019	\$4,550.42	\$72,722,469.29	\$42,279,114.86	\$9,498,434.65	\$3,829,988.69	\$1,586,776.87
Jun 2019	\$0.00	\$10,118.74	\$71,458,538.96	\$44,023,600.90	\$12,440,804.59	\$2,414,059.54
Jul 2019	\$0.00	\$0.00	\$21,691.27	\$69,466,853.58	\$58,356,859.51	\$7,849,178.44
Aug 2019	\$0.00	\$0.00	\$0.00	\$7,861.65	\$75,825,880.16	\$42,102,106.39
Sep 2019	\$0.00	\$0.00	\$0.00	\$0.00	\$8,683.16	\$69,574,944.96
Oct 2019	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,559.21
Nov 2019	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Dec 2019	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Service Month	Month Paid					
	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020
Jan 2019	\$94,690.08	\$14,010.38	(\$24,538.19)	\$68,908.95	\$12,003.90	(\$17,938.70)
Feb 2019	\$159,400.08	\$69,100.72	\$8,838.04	\$123,629.77	\$5,016.22	\$34,461.64
Mar 2019	\$657,862.04	\$176,304.57	\$1,295,244.60	\$119,862.49	\$149,818.75	\$65,023.36
Apr 2019	\$187,576.47	\$447,451.89	\$72,954.59	\$52,867.83	\$142,671.66	\$868,458.47
May 2019	\$521,089.46	\$484,867.39	\$77,541.00	(\$4,707.42)	(\$33,558.53)	\$233,527.90
Jun 2019	\$1,651,786.72	\$1,698,806.83	\$425,326.69	\$106,151.22	\$117,191.21	(\$30,080.95)
Jul 2019	\$4,717,059.25	\$2,732,725.46	\$993,438.76	\$130,062.80	\$682,864.42	\$174,860.55
Aug 2019	\$12,568,461.28	\$4,173,541.20	\$2,109,130.28	\$911,186.59	\$828,407.87	\$389,980.21
Sep 2019	\$45,813,373.92	\$13,119,740.92	\$2,601,449.39	\$774,130.84	\$481,600.21	\$1,469,533.98
Oct 2019	\$74,541,351.79	\$58,028,388.09	\$10,517,132.35	\$2,218,509.02	\$1,949,123.12	\$1,231,210.12
Nov 2019	\$12,548.67	\$74,480,884.29	\$50,617,505.76	\$9,379,705.53	\$4,415,215.05	\$2,123,817.01
Dec 2019	\$0.00	\$7,339.66	\$81,373,871.26	\$49,549,867.59	\$21,354,770.58	\$4,728,542.88

## Claims Distribution Based on Age/Gender

The following is based on Incurred Medical and Pharmacy Claims from Jan-Dec 2019.

	Female			Male		
Age Group	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member
Ages < 1	1,056	\$18,268,772.21	\$17,294.51	1,109	\$24,073,703.91	\$21,709.21
Ages 1-4	5,035	\$12,451,739.26	\$2,473.00	5,408	\$14,712,805.64	\$2,720.40
Ages 5-9	7,613	\$16,556,395.72	\$2,174.85	8,141	\$17,208,070.19	\$2,113.78
Ages 10-14	9,250	\$22,088,645.53	\$2,388.07	9,536	\$21,764,671.49	\$2,282.33
Ages 15-17	5,994	\$20,142,567.67	\$3,360.69	6,136	\$19,943,469.43	\$3,250.37
Ages 18-19	4,008	\$14,217,875.61	\$3,547.37	4,183	\$8,650,361.92	\$2,067.94
Ages 20-24	10,020	\$34,135,635.20	\$3,406.75	9,363	\$18,894,501.38	\$2,017.91
Ages 25-29	8,274	\$33,729,123.79	\$4,076.56	4,952	\$10,554,952.43	\$2,131.27
Ages 30-34	8,997	\$47,634,635.94	\$5,294.70	5,173	\$14,741,028.46	\$2,849.79
Ages 35-39	11,322	\$59,340,679.55	\$5,241.03	6,529	\$20,904,199.44	\$3,201.66
Ages 40-44	12,193	\$77,974,204.65	\$6,394.91	7,356	\$32,299,272.21	\$4,391.17
Ages 45-49	14,370	\$99,835,015.14	\$6,947.54	8,977	\$52,547,460.75	\$5,853.29
Ages 50-54	14,999	\$125,828,076.19	\$8,389.38	9,611	\$77,377,462.47	\$8,051.21
Ages 55-59	17,300	\$163,986,920.32	\$9,479.15	10,826	\$106,473,857.33	\$9,834.79
Ages 60-64	19,354	\$212,063,473.23	\$10,956.90	11,721	\$146,307,866.39	\$12,482.28
Ages 65-74	2,529	\$31,813,153.10	\$12,577.27	2,105	\$33,005,135.75	\$15,682.50
Ages 75-84	162	\$1,872,107.18	\$11,550.28	161	\$2,400,070.63	\$14,868.79
Ages 85+	3	\$18,640.05	\$5,455.62	6	\$64,306.18	\$10,288.99
<b>Total</b>	<b>152,479</b>	<b>\$991,957,660.34</b>	<b>\$6,505.55</b>	<b>111,294</b>	<b>\$621,923,196.00</b>	<b>\$5,588.10</b>

## **Allowed Amount Distribution by Member Count**

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2014—2018 and year to date for 2019.

<b>Allowed Amount</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
less than 0.00	22	4	2	1	5	9
\$0.00 - \$499.99	66,180	72,760	72,608	71,180	69,949	67,380
\$500.00 - \$999.99	39,137	39,862	40,982	41,563	42,884	41,380
\$1,000.00 - \$1,999.99	43,065	41,247	40,963	42,085	43,451	43,456
\$2,000.00 - \$4,999.99	51,911	49,217	48,716	49,648	50,007	50,704
\$5,000.00 - \$9,999.99	29,515	26,834	27,302	26,817	27,349	27,809
\$10,000.00 - \$14,999.99	12,825	11,369	11,647	12,107	12,423	12,805
\$15,000.00 - \$19,999.99	6,755	5,605	6,152	6,389	6,801	7,342
\$20,000.00 - \$29,999.99	6,374	5,612	5,909	6,229	6,831	7,101
\$30,000.00 - \$49,999.99	5,272	4,475	4,841	5,064	5,391	5,952
\$50,000.00 - \$74,999.99	2,520	2,225	2,347	2,673	2,784	3,014
\$75,000.00 - \$99,999.99	1,037	944	1,115	1,201	1,331	1,443
\$100,000.00 - \$149,999.99	846	777	886	959	1,041	1,152
\$150,000.00 - \$199,999.99	344	320	330	369	443	500
\$200,000.00 - \$249,999.99	179	148	174	168	205	219
over \$249,999.99	326	231	252	292	318	380
<b>Total</b>	<b>266,308</b>	<b>261,630</b>	<b>264,226</b>	<b>266,745</b>	<b>271,213</b>	<b>270,646</b>

## Summary of Enrollment and Claims

The following provides a summary of members, Incurred Medical Claims and Incurred Pharmacy Claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
Jan 2019	265,184	\$113,782,856.32	\$77,264,593.42	\$36,518,262.90	712,254	316,496	386,932
Feb 2019	264,795	\$110,050,928.91	\$74,602,535.48	\$35,448,393.43	650,163	292,168	349,364
Mar 2019	265,692	\$126,707,386.62	\$86,961,495.14	\$39,745,891.48	683,644	301,525	374,335
Apr 2019	264,179	\$132,235,015.23	\$91,412,548.23	\$40,822,467.00	667,292	301,308	357,796
May 2019	264,144	\$131,219,571.23	\$89,992,560.87	\$41,227,010.36	669,573	296,979	364,692
Jun 2019	263,724	\$134,299,297.78	\$95,507,823.98	\$38,791,473.80	626,884	284,386	334,844
Jul 2019	262,851	\$145,163,109.65	\$102,750,587.85	\$42,412,521.80	680,578	317,042	355,697
Sep 2019	260,361	\$133,859,023.22	\$93,002,274.63	\$40,856,748.59	654,194	292,870	353,552
Aug 2019	261,307	\$138,966,668.51	\$98,095,477.87	\$40,871,190.64	655,765	299,323	348,606
Oct 2019	264,145	\$148,700,728.19	\$104,489,699.87	\$44,211,028.32	741,068	343,095	389,767
Nov 2019	264,321	\$141,272,438.47	\$99,469,765.66	\$41,802,672.81	674,949	306,960	360,068
Dec 2019	264,585	\$157,623,832.21	\$111,098,763.00	\$46,525,069.21	724,476	319,620	396,836

*NOTE: Includes run out data from all Carriers*

The following illustrates the change in incurred claims (includes Medical and Pharmacy) by rolling year.

Time Period	Members	Total Medical and Rx Claims	Total Medical Claims	Total Rx Claims
Jan 2019 - Dec 2019	263,774	\$1,622,390,263	\$1,133,052,577	\$489,337,685
Jan 2018 - Dec 2018	263,285	\$1,485,323,515	\$1,046,953,486	\$438,370,029
% Change (Roll Yrs)	0.19%	9.23%	8.22%	11.63%

## **Appendix A**

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan for members of the Kentucky Group Health Insurance Board (KGHIB).

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

This report is compiled using Advantage Suite, which is DEI's health insurance information management system. IBM Watson Health warehouses enrollment and claims data on behalf of the KEHP. Enrollment data is provided by DEI while claims data is provided by KEHP's Medical and Pharmacy administrators

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding and dropping dependents, marriage, divorce, Medicare eligibility, etc. Therefore, Advantage Suite is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2018, Advantage Suite processed enrollment information for a total of 271,060 members as well as 8,085,632 claims (3,552,632 Medical claims and 4,533,000 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Advantage Suite.

## **Appendix B—Definitions**

- **Allowed Amount** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- **Carrier** refers to claims listed by carrier. (Please note that CVS data is designated as Anthem).
- **Days Supply** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- **Employee** represents an individual eligible to participate in KEHP as a retiree, or by being employed by one of the agencies that participate with KEHP (example: state employee, school board, quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Advantage Suite deals with Cross-Reference plans uniquely. Although there are in fact two “employees” Advantage Suite can only designate the planholder as an employee. Therefore, the Cross-Reference spouse is considered a dependent and all claims and utilization data related to that spouse is counted as a “member”.
- **Generic Efficiency** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- **Group** is Kentucky Retirement System (KRS), Kentucky Teachers’ Retirement System (TRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, and Quasi/Local Governments).
- **Incurred Claims** refer to paid amounts for claims that were incurred in a specified timeframe.
- **IP** refers inpatient procedures and/or claims.
- **LOS** refers to length of stay of an acute admission.
- **Mail Order** is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- **Member** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- **Member Cost per Script** is the average net amount paid per prescription filled per member (Net Pay Rx/Members).
- **Net Payment** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- **OOP** is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- **OP** refers to outpatient procedures and/or claims.
- **OP Rad** refers to outpatient radiology claims an/or patients.
- **Paid Claims** specify the paid amount for claims regardless of when the claims may have been incurred.
- **Patient Cost per Script** is the average net amount paid per prescription filled per patient (Net Pay Rx/Patients).
- **Patients** is the unique count of members who received facility, professional, or pharmacy services.

## **Appendix B—Definitions** *(continued)*

- ***Plan*** is Standard PPO, Standard CDHP, LivingWell Basic CDHP, LW High Deductible Plan, LivingWell PPO and LivingWell CDHP.
- ***Rcnt SGovt*** refers to recent State Government benchmarks.
- ***Rcnt US*** refers to recent US national benchmarks.
- ***Retail*** is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.